Case 16-12651 Doc 1 Filed 04/13/16 Entered 04/13/16 18:37:45 Desc Main Document Page 1 of 55

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is your government-issue picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the truste	First name K Middle name Erlandson	First name Middle name Last name and Suffix (Sr., Jr., II, III)	_
2.	All other names you I used in the last 8 yea Include your married or maiden names.	rs		
3.	Only the last 4 digits your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8349		

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Case number (if known)

Debtor 1 Robert K Erlandson

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	215 Lakeside Court Apt 1222	If Debtor 2 lives at a different address:			
		Saint Charles, IL 60174 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Kane				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Robert K Erlandson

ar	Tell the Court About	Your Ba	ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	☐ Ch	hapter 7					
		☐ Ch	hapter 11					
		☐ Ch	hapter 12					
		■ Cł	hapter 13					
3.	How you will pay the fee		about how yo order. If your	vill pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details bout how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money der. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with pre-printed address.				
					callments. If you choose so (Official Form 103A).	this option, sign and at	tach the Application for	r Individuals to Pay
		_	but is not req applies to you	uired to, waive y ur family size an	ived (You may request the your fee, and may do so on do you are unable to pay to Chapter 7 Filing Fee Waiv	only if your income is le the fee in installments).	ess than 150% of the of . If you choose this opti	fficial poverty line that ion, you must fill out
			ino Application	m to mave the c	maple 77 ming 1 ee wan	ou (omoiai i omi 1005	y and more manyour po	oution.
O. Have you filed for ■ No. No.								
	last 8 years?	☐ Ye						
			District		When _		•	
			District		When _		Case number	
			District		When _		Case number	
10.	Are any bankruptcy	■ No)					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	□ Ye	es.					
	affiliate?							
			Debtor			R	Relationship to you	
			District		When _	C	Case number, if known	
			Debtor			R	Relationship to you	
			District	-	When	C	Case number, if known	
I1. Do you rent your No. Go to line 12.								
		☐ Ye	es. Has yo	ur landlord obta	ined an eviction judgmer	nt against you and do y	ou want to stay in your	residence?
				No. Go to line	12.			
				Yes. Fill out <i>Ini</i> bankruptcy pet	itial Statement About an L ition.	Eviction Judgment Aga	inst You (Form 101A) a	and file it with this

Debtor 1	Robert K Erlandson	Document	Page 4 of 55	number (if known)	

Part	Report About Any Bu	sinesses	You Owr	as a Sole Proprie	tor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to						
		☐ Yes.	Name	and location of bus	iness				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Name of business, if any					
	If you have more than one sole proprietorship, use a		Numb	per, Street, City, Stat	te & ZIP Code				
	separate sheet and attach it to this petition.		Chec	k the appropriate bo	x to describe your business:				
	·			Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))				
				☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))					
				Stockbroker (as defined in 11 U.S.C. § 101(53A))					
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it of deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance is operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, for in 11 U.S.C. 1116(1)(B).				a small business debtor, you must attach your most recent balance sheet, statement of					
	For a definition of small	■ No.	I am r	not filing under Chap	oter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.					
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Part	4: Report if You Own or	Have Any	, Hazardo	ous Property or An	y Property That Needs Immediate Attention				
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and	u own or have any No. rty that poses or is d to pose a threat							
	identifiable hazard to public health or safety? Or do you own any								
	property that needs immediate attention?			liate attention is why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?					
					Number, Street, City, State & Zip Code				

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Debtor 1 Robert K Erlandson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 55 Case number (if known) Debtor 1 **Robert K Erlandson** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Robert K Erlandson Signature of Debtor 2 Robert K Erlandson Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on April 13, 2016

MM / DD / YYYY

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Debtor 1 Robert K Erlandson Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Alonzo H. Zahour	Date	April 13, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Alonzo H. Zahour		
Printed name		
Alonzo H. Zahour		
Firm name		
235 Remington Blvd Suite G1		
Bolingbrook, IL 60440		
Number, Street, City, State & ZIP Code		
Contact phone (630) 759-3631	Email address	ahzlawyer@aol.com
03099598		
Bar number & State		

	DOCUM	<u>-: Page 8 01.55</u>		
mation to identify your	case:			
Robert K Erlands	on			
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
				☐ Check if this is an amended filing
	Robert K Erlands First Name First Name	Robert K Erlandson First Name Middle Name First Name Middle Name	Robert K Erlandson First Name Middle Name Last Name First Name Middle Name Last Name	Robert K Erlandson First Name Middle Name Last Name First Name Middle Name Last Name

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		ssets of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	157,900.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$	14,165.00
1c. Copy line 63, Total of all property on Schedule A/B	\$	172,065.00
2: Summarize Your Liabilities		
		abilities It you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	210,099.78
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	97,575.52
Your total liabilities	\$	307,675.30
3: Summarize Your Income and Expenses		
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,456.36
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,821.33
4: Answer These Questions for Administrative and Statistical Records		
Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
Yes What kind of debt do you have?		
	1a. Copy line 55, Total real estate, from Schedule A/B	1a. Copy line 55, Total real estate, from Schedule A/B

the court with your other schedules.

Official Form 106Sum

Summary of Yo

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

Debtor 1 Robert K Erlandson Document Page 9 of 55
Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____9,580.83

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	(Case 16-12651	Doc 1	Filed 04/13/16 Document	Entered 04/13/1	6 18:37:45	Desc	Main	
Fill	in this inf	ormation to identify yo	ur case and th						
Deb	otor 1	Robert K Erlan	dson						
Doh	otor 2	First Name	Middle	e Name	Last Name				
	use, if filing)	First Name	Middle	e Name	Last Name				
Unit	ted States	Bankruptcy Court for the	: NORTHER	N DISTRICT OF ILLI	NOIS				
Cas	se number				_			Check if this is an amended filing	
SC n eachink	chedu ch category cit fits best	. Be as complete and accunore space is needed, atta	ribe items. List urate as possib	le. If two married peopl	an asset fits in more than one e are filing together, both are le top of any additional pages,	equally responsible	for supply	ing correct	
Part	1: Descri	be Each Residence, Build	ing, Land, or Ot	her Real Estate You O	wn or Have an Interest In				
. Do	o you own	or have any legal or equita	ıble interest in a	any residence, building	, land, or similar property?				
	No. Go to	Part 2.							
	Yes. Whe	re is the property?							
1.1	1980 Ca	obblestone Road		What is the propert					
		ess, if available, or other descript	ion	☐ Single-family ☐ Duplex or mu	nome Iti-unit building	the amount of any	or exemptions. Put ims on <i>Schedule D:</i>		
				_	or cooperative	Creditors Who Have Claims Secured by Prop			
				☐ Manufactured	d or mobile home				
	Romeo	ville IL 6	0446-0000	☐ Land	TOT MODILE HOME	Current value of t entire property?		rrent value of the ortion you own?	
	City	State	ZIP Code	☐ Investment p	roperty	\$157,900	=	\$157,900.00	
				☐ Timeshare				ownership interest	
				Under (such as fee simple, tenand a life estate), if known. Debtor 1 only Joint tenant				by the entireties, or	
	Will			Debtor 2 only					
	County			Debtor 1 and	Debtor 2 only	☐ Check if this	is commur	nity property	
					of the debtors and another	(see instructions)	,, ,	
				Other information y property identificat	ou wish to add about this iten ion number:	i, such as local			
				Property in fore					
				. ,					

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$157,900.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Case number (if known) Document Debtor 1 Robert K Erlandson 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Hyundai Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Elantra Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2015 Year: Debtor 2 only Current value of the Current value of the 15000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$11,265.00 \$11,265.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$11,265.00 pages you have attached for Part 2. Write that number here...... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Bed, dresser, couch, dining room set, 2 console tables \$800.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... 1 TV \$100.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... Examples: Pistols, rifles, shotguns, ammunition, and related equipment Nο

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Desc Main

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De	ebtor 1	Robert K Erland	dson	Document	Page 12 of 55 Case number (if known)	
	☐ Yes.	Describe				
	□ No		s, furs, leather coats	, designer wear, shoes,	accessories	
		0	rdinary supply			\$400.00
	■ No		y, costume jewelry, e	engagement rings, wedd	ding rings, heirloom jewelry, watches, gems, g	old, silver
	Examµ ■ No	rm animals oles: Dogs, cats, birds	s, horses			
	■ No	her personal and ho	-	ı did not already list, ir	ncluding any health aids you did not list	
15				om Part 3, including a	ny entries for pages you have attached	\$1,300.00
Pa	rt 4: De	scribe Your Financial	Assets			
Do	you ov	vn or have any lega	l or equitable intere	est in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	, ,		ur home, in a safe depo	sit box, and on hand when you file your petition	on
	Exam _l			accounts; certificates o	f deposit; shares in credit unions, brokerage h itution, list each.	nouses, and other similar
	□ No ■ Yes			Institution n	ame:	
_		1	7.1. Checking	Chase Ba	nk	\$900.00
18.	Exam	, mutual funds, or poles: Bond funds, invo		ks th brokerage firms, mon	ey market accounts	
	■ No □ Yes		Institution or is	suer name:		
19.	joint v	ublicly traded stock renture	and interests in inc	corporated and uninco	orporated businesses, including an interes	t in an LLC, partnership, and
	■ No □ Yes.	Give specific inform	ation about them			
	— 163.	Cive specific infollit	Name of entity:		% of ownership:	
20.	Negoti	<i>iable instrument</i> s incl	ude personal checks		egotiable instruments nissory notes, and money orders. by signing or delivering them.	
		Give specific informa	ation about them	Cabadula A/D F	Ironorty	
OT	ıcıaı Forr	m 106A/B		Schedule A/B: F	roperty	page 3

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Case number (if known) Document Debtor 1 Robert K Erlandson Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☐ No Institution name or individual: ■ Yes. Rent Amli of St. Charles, security deposit for rent \$700.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Dobtor 1	Case 16-12651	Doc 1	Filed 04/13/16 Document	Entered 04/13/16 18:37:45 Page 14 of 55 Case number (if known)	Desc Main
Debtor 1	Robert K Erlandson			Case Humber (# known)	
☐ Yes.	Name the insurance compa Com	any of each pop pany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
If you some of	terest in property that is deare the beneficiary of a living one has died. Give specific information			ed surance policy, or are currently entitled to rece	eive property because
Examp ■ No	s against third parties, who ples: Accidents, employmen Describe each claim			it or made a demand for payment s to sue	
■ No	contingent and unliquidat Describe each claim	ed claims of	every nature, includin	g counterclaims of the debtor and rights to	set off claims
■ No	nancial assets you did not Give specific information	already list			
				ny entries for pages you have attached	\$1,600.00
Part 5: De	scribe Any Business-Related	Property You	Own or Have an Interest I	In. List any real estate in Part 1.	
37. Do vou	own or have any legal or equi	table interest i	n anv business-related p	roperty?	
`	o to Part 6.		, , , , , , , , , , , , , , , , , , , ,		
☐ Yes. 0	Go to line 38.				
	escribe Any Farm- and Commo			n or Have an Interest In.	
46. Do yo u	u own or have any legal or	equitable in	terest in any farm- or o	commercial fishing-related property?	
■ No.	Go to Part 7.				
☐ Yes	s. Go to line 47.				
Part 7:	Describe All Property You	Own or Have a	n Interest in That You Dic	d Not List Above	
	u have other property of an oldes: Season tickets, country				
	Give specific information				
54. Add 1	the dollar value of all of yo	our entries fro	om Part 7. Write that n	umber here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known) Document Debtor 1 Robert K Erlandson

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$157,900.00
56.	Part 2: Total vehicles, line 5	\$11,265.00		
57.	Part 3: Total personal and household items, line 15	\$1,300.00		
58.	Part 4: Total financial assets, line 36	\$1,600.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$14,165.00	Copy personal property total	\$14,165.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$172,065.00

Official Form 106A/B Schedule A/B: Property page 6

		IAMAIIII.		
Fill in this infor	mation to identify your	case:		
Debtor 1	Robert K Erlands	on		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				
(II KHOWH)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
1980 Cobblestone Road Romeoville, IL 60446 Will County	\$157,900.00		\$0.00	735 ILCS 5/12-1001(b)
Property in foreclosure Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
Bed, dresser, couch, dining room set, 2 console tables	\$800.00		\$800.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
1 TV Line from Schedule A/B: 7.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
Elle Holli Generale A/D.			100% of fair market value, up to any applicable statutory limit	
Ordinary supply Line from Schedule A/B: 11.1	\$400.00	•	\$400.00	735 ILCS 5/12-1001(a)
Life from Schedule A/D. 1111			100% of fair market value, up to any applicable statutory limit	
Checking: Chase Bank Line from Schedule A/B: 17.1	\$900.00		\$900.00	735 ILCS 5/12-1001(b)
Line nom Schedule A/D. 11.1			100% of fair market value, up to any applicable statutory limit	

Case 16-12651 Doc 1 Filed 04/13/16 Entered 04/13/16 18:37:45 Desc Main Document Page 17 of 55 Case number (if known) Robert K Erlandson Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Rent: Amli of St. Charles, security 735 ILCS 5/12-1001(b) \$700.00 \$700.00 deposit for rent 100% of fair market value, up to Line from Schedule A/B: 22.1 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

		Document	Page 18	of 55		
Fill in this informat	tion to identify you	r case:				
Debtor 1	Robert K Erland	son				
_	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankr	untcy Court for the	NORTHERN DISTRICT OF	ILLINOIS			
Ormod Otatoo Barmi	aptoy Count for the					
Case number						
(if known)					_	if this is an
					amend	led filing
Official Forms	1000					
Official Form [*]	106D					
Schedule D	: Creditors	Who Have Claims	s Secured	d by Propert	У	12/15
s needed, copy the Ad		f two married people are filing tog ut, number the entries, and attact				
number (if known).						
1. Do any creditors ha	_					
	is box and submit th	nis form to the court with your ot	her schedules. Yo	ou have nothing else t	o report on this form.	
Yes. Fill in all	l of the information b	pelow.				
Part 1: List All S	Secured Claims					
2 List all secured cla	ims If a creditor has m	nore than one secured claim, list the	creditor separately	Column A	Column B	Column C
for each claim. If more	than one creditor has	a particular claim, list the other cred	ditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, list t	he claims in alphabetic	cal order according to the creditor's r	name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 PNC Bank		Describe the property that secur	res the claim:	\$23,859.00	\$11,265.00	\$12,594.00
Creditor's Name		2015 Hyundai Elantra 150				
		As of the data way file the alaim	in our land			
2730 Liberty		As of the date you file, the claim apply.	IS: Check all that			
Pittsburgh, l	PA 15222	☐ Contingent				
Number, Street, Cit	y, State & Zip Code	☐ Unliquidated				
	_	☐ Disputed				
Who owes the debt?	? Check one.	Nature of lien. Check all that app	oly.			
Debtor 1 only		☐ An agreement you made (such car loan)	as mortgage or sec	ured		
Debtor 2 only						
Debtor 1 and Debto		☐ Statutory lien (such as tax lien,	mechanic's lien)			
☐ At least one of the o		☐ Judgment lien from a lawsuit				
Check if this claim community debt	n relates to a	Other (including a right to offset	t) Purchase N	Money Security		
Date debt was incurre	ed	Last 4 digits of account n	umber 1989			
Wells Fargo	Home			£400 040 70	£4.57.000.00	£00 040 70
Mortgage		Describe the property that secur		\$186,240.78	\$157,900.00	\$28,340.78
Creditor's Name		1980 Cobblestone Road F	Romeoville, ∣			
c/o Manley [IL 60446 Will County				
Kochalski L		Property in foreclosure As of the date you file, the claim	is: Check all that			
	er Suite 1250	apply.	ondok ali triat			
Chicago, IL		Contingent				
Number, Street, Cit	y, State & Zip Code	Unliquidated				
Who owes the debt?	Charle and	Disputed Nature of lien. Check all that app	sh.			
	: Check one.		•			
Debtor 1 only		An agreement you made (such car loan)	as mortgage or sec	urea		
☐ Debtor 2 only ☐ Debtor 1 and Debtor	or 2 only	☐ Statutory lien (such as tax lien,	machanic's lian)			
	-	☐ Judgment lien from a lawsuit	mechanics ilen)			
At least one of the o		_	Circt Mant -	one 9 Coopered Mari	rtaaaa	
Check if this claim community debt	n relates to a	Other (including a right to offset	t) First Wortg	age & Second Mo	ıyaye	
Date debt was incurre	ed 2012	Last 4 digits of account n	umber 2079			

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Debtor 1	Robert K Er	landson		Case number (if know)	
	First Name	Middle Name	Last Name	_	
Add the	dollar value of y	our entries in Column A on t	his page. Write that number here:	\$210,099.78	3
	the last page of at number here:	your form, add the dollar val	lue totals from all pages.	\$210,099.78	3

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

			Docume	nt Page	20 of	55	_		
Fill in	this inform	nation to identify your ca	se:						
Debto	r 1	Robert K Erlandson	1						
		First Name	Middle Name	Last Nan	ne				
Debto									
(Spouse	e if, filing)	First Name	Middle Name	Last Nan	ie				
United	d States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS					
Case	number								
(if know] Check if	this is an
								amende	d filing
Offic	ial Earn	n 106E/F							
		/F: Creditors Wh	o Havo Uncocu	rod Claim					12/15
		d accurate as possible. Use				or graditors with NO	NDDIODITY	oloimo Liet	
		racts or unexpired leases th							
Schedu	ile G: Execu	tory Contracts and Unexpire	d Leases (Official Form 1	06G). Do not incl	ude any cre	editors with partially	secured cla	aims that are	e listed in
		ors Who Have Claims Secur tinuation Page to this page.							
		nber (if known).	ii you nave no imormation	ii to report iii a r	art, do not	ille tilat Fart. On tile	top or any a	iduitional pa	ages, write your
Part 1	List Al	II of Your PRIORITY Unse	ecured Claims						
1. Do	any credito	ors have priority unsecured	claims against you?		,			,	
	No. Go to Pa	art 2.							
	Yes.								
		priority unsecured claims.	f a creditor has more than o	ne priority unsecu	ıred claim li	ist the creditor separa	tely for each	claim For ea	ach claim listed
		pe of claim it is. If a claim has							
		e claims in alphabetical order a than one creditor holds a parti			nore than tw	vo priority unsecured	claims, fill ou	t the Continu	ation Page of
		ation of each type of claim, see			a booklot)				
(F	or arrexplana	ation of each type of claim, see	the instructions for this for	II III tile ilistractioi	i bookiet.)	Total claim	Priority		Nonpriority
0.4	5.4.5.	1 1				40.0	amount		amount
2.1		landson editor's Name	Last 4 digits of	account number	·	\$0.0		\$0.00	\$0.00
	,	bblestone Road	When was the	debt incurred?	01/01/2	2016			
		ville, IL 60446			-				
		treet City State Zlp Code	As of the date y	ou file, the clain	ı is: Check	all that apply			
_	_	d the debt? Check one.	☐ Contingent						
	Debtor 1 o	only	☐ Unliquidated						
[Debtor 2 o	only	☐ Disputed						
	Debtor 1 a	and Debtor 2 only	Type of PRIORI	TY unsecured cl	aim:				
[At least on	ne of the debtors and another	■ Domestic su	pport obligations					
[☐ Check if tl	his claim is for a communit	v debt ☐ Taxes and ce	ertain other debts	vou owe the	e government			
		subject to offset?			•	ou were intoxicated			
_	No	•	☐ Other. Speci	fv					
	☐Yes		— Curior: Opeon	Maintenar	ice				
Part 2	List Al	II of Your NONPRIORITY	Unsecured Claims						
3. Do	any credito	ors have nonpriority unsecu	ed claims against you?						
	No. You hav	ve nothing to report in this part	. Submit this form to the cou	urt with your other	schedules.				
	Yes.								
un	secured clain	nonpriority unsecured claim, list the creditor separately for helds a portion loss lists	or each claim. For each clair	m listed, identify w	hat type of	claim it is. Do not list of	claims alread	y included in	Part 1. If more
	an one credit	or holds a particular claim, list	the other creditors in Part 3	.ii you nave more	man mree r	ionphonty unsecured	ciaims iii ou	the Continu	alion Page of

Total claim

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Debtor 1 Robert K Erlandson Case number (if know) 4.1 \$5,723.52 Ally Financial Last 4 digits of account number 3809 Nonpriority Creditor's Name PO Box 380902 When was the debt incurred? Minneapolis, MN 55438 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify automobile loan for returned auto ☐ Yes 4.2 **American Express** Last 4 digits of account number 3008 \$4,332.51 Nonpriority Creditor's Name **Customer Service** When was the debt incurred? PO Box 981535 El Paso, TX 79998-1535 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify general \$2,213.00 4.3 **Amex Department Stores** Last 4 digits of account number XXXX Nonpriority Creditor's Name PO Box 8218 When was the debt incurred? Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify general

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Debtor 1 Robert K Erlandson Case number (if know) 4.4 \$9,881.60 **Bank of America** Last 4 digits of account number 2416 Nonpriority Creditor's Name PO Box 982235 When was the debt incurred? El Paso, TX 79998-2235 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify general 4.5 **Bank of America** Last 4 digits of account number 8511 \$4,019.57 Nonpriority Creditor's Name PO Box 982235 When was the debt incurred? El Paso, TX 79998-2235 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify general 4.6 Citi Cards Last 4 digits of account number 1197 \$5,887.36 Nonpriority Creditor's Name PO Box 6500 When was the debt incurred? Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify general

Document Page 23 of 55 Debtor 1 Robert K Erlandson Case number (if know) 4.7 \$288.61 **Comenity Bank Maurices** Last 4 digits of account number 6187 Nonpriority Creditor's Name **Bankruptcy Dept** When was the debt incurred? PO Box 182125 Columbus, OH 43218-2125 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify **general** 4.8 **Discover Bank** \$14,545.00 Last 4 digits of account number 6752 Nonpriority Creditor's Name PO Box 30421 When was the debt incurred? Salt Lake City, UT 84130-0421 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify general \$610.40 4.9 **DuPage Medical Group** Last 4 digits of account number 3509 Nonpriority Creditor's Name 15921 Collections Center Drive When was the debt incurred? 2015 Chicago, IL 60693-0159 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

■ No

☐ Yes

report as priority claims

■ Other. Specify medical

☐ Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Robert K Erlandson	Case number (if know)	
DuPage Valley Anesthesia	Last 4 digits of account number 1352	\$852.6
Nonpriority Creditor's Name PO Box 3872	When was the debt incurred? 2014	
Carol Stream, IL 60132		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify medical	
Edward Hospital	Last 4 digits of account number 0539	\$2,135.2
Nonpriority Creditor's Name		• ,
801 S Washington Naperville, IL 60540	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt	\square Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify medical	
Edward Hospital	Last 4 digits of account number 6507	\$200.0
Nonpriority Creditor's Name	40/40/0044	
PO Box 4207 Carol Stream, IL 60197-4207	When was the debt incurred? 12/19/2014	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify medical	

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Case number (if know)

DCDI	Nobell K Elialiusoli	- Case Humber (II know)	
4.1 3	Kohl's	Last 4 digits of account number 7996	\$1,386.46
	Nonpriority Creditor's Name PO Box 3043	When was the debt incurred?	
	Milwaukee, WI 53201-3043 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify general	
4.1 4	Law Office of Kathryn Engel	Last 4 digits of account number	\$174.46
	Nonpriority Creditor's Name 15 Salt Creek Lane Suite 122	When was the debt incurred? 2015	
	Hinsdale, IL 60521 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify attorney fees	
4.1	Macys	Last 4 digits of account number 0150	\$678.92
<u> </u>	Nonpriority Creditor's Name Bankruptcy Processing	When was the debt incurred?	· · · · · · · · · · · · · · · · · · ·
	PO Box 8053 Mason, OH 45040		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify general	

Debtor	1 Robert K Erlandson	Case number (if know)	
4.1 6	PNC Bank	Last 4 digits of account number 1434	\$15,600.00
	Nonpriority Creditor's Name 6750 Miller Road Brecksville, OH 44141	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify general	
4.1	PNC Bank	Last 4 digits of account number 5978	\$24,188.00
	Nonpriority Creditor's Name PO Box 3180 Pittsburgh, PA 15230	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify general	
4.1	State Farm Bank	Last 4 digits of account number 0720	\$4,858.19
	Nonpriority Creditor's Name PO Box 87	When was the debt incurred?	
	Deposit, NY 13754-0087 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	76 of the date yearing, the claim to. Officer all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Name and Address

☐ Yes

On which entry in Part 1 or Part 2 did you list the original creditor?

■ Other. Specify **general**

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Robert K Erlandson

Medical Recovery Specialists 2250 E Devon Ave Suite 352 Des Plaines, IL 60018

Line **4.11** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	00.	Carrette And all other priority and course diameter. While that amount here.	04.	Ψ	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	-				0.00
				7	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		•	0.00
		you did not report as priority claims	6g.	\$	
	6h.	3, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4,	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	97,575.52
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	97,575.52

		1200000			
Fill in this infor	mation to identify your	case:			
Debtor 1	Robert K Erlandson				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

Amli of St. Charles
100 Lakeside Drive
Saint Charles, IL 60174

Lease for apartment ends April 14, 2016

		<u> Docume</u>	nt Page 29 of	<u>55 </u>
Fill in this info	rmation to identify your	case:		
Debtor 1	Robert K Erlands	on		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an amended filing
	orm 106H • H: Your Cod	ebtors		12/15
people are filing ill it out, and no our name and	g together, both are equ umber the entries in the case number (if known)	ally responsible for supp	lying correct information the Additional Page to t	complete and accurate as possible. If two married n. If more space is needed, copy the Additional Page, this page. On the top of any Additional Pages, write a codebtor.
■ Yes				
		lived in a community pro Nevada, New Mexico, Pue		(Community property states and territories include yton, and Wisconsin.)
■ No. Go to		use, or legal equivalent live	with you at the time?	
in line 2 ag	gain as a codebtor only i)), Schedule E/F (Official	f that person is a guarant	or or cosigner. Make su	your spouse is filing with you. List the person shown re you have listed the creditor on Schedule D (Official S). Use Schedule D, Schedule E/F, or Schedule G to fill
	mn 1: Your codebtor Number, Street, City, State and Zl	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
1980	n Erlandson O Cobblestone Road Deoville, IL 60446			■ Schedule D, line □ Schedule E/F, line □ Schedule G Wells Fargo Home Mortgage

Schedule H: Your Codebtors

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Fill	in this information to identify your ca	ase:							
	otor 1 Robert K Er								
	otor 2 puse, if filing)				_				
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_				
(If kr	fficial Form 106l					13 income a	ed filing ent showing post as of the followin		
	chedule I: Your Inc	ome				MM / DD/ Y	YYY	12/15	
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your s th you, do not includ	pouse is le inforn	s living w nation ab	vith you, inclu out your spo	ude information ouse. If more sp	about your ace is needed,	
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing s	pouse	
	If you have more than one job,	Employment status	■ Employed			☐ Emplo	☐ Employed		
	attach a separate page with information about additional	zmproyment status	☐ Not employed			☐ Not employed			
	employers.	Occupation	Industrial Sales Manager Air Filter Engineers			_			
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address	385 Kimberly Dr Carol Stream, IL						
		How long employed the	here? 19 years	5					
Par	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to re	port for a	any line, v	vrite \$0 in the	space. Include y	our non-filing	
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	mployers	for that perso	on on the lines be	low. If you need	
					For	Debtor 1	For Debtor 2 non-filing spo		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	8,199.84	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	

Calculate gross Income. Add line 2 + line 3.

8,199.84

N/A

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Debt	or 1	Robert K Erlandson	-	Cas	e number (if ki	nown)				
	Cor	by line 4 here	4.	Fo \$	or Debtor 1 8,199	2 84		ebtor 2		
			٦.	Ψ_	0,13	7.04	Ψ		IN/A	-
5.		all payroll deductions:	_	_						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	1,73		\$		N/A	-
	5b.	Mandatory contributions for retirement plans	5b.	\$ \$		0.00	\$		N/A	-
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c. 5d.	\$ \$		0.00	\$		N/A	-
	5u. 5e.	Insurance	5u. 5e.	φ_ \$		0.00 6.63	\$ 		N/A N/A	-
	5f.	Domestic support obligations	5f.	\$	2,30		\$		N/A	=
	5g.	Union dues	5g.	\$		0.00	\$		N/A	-
	5h.	Other deductions. Specify:	5h	+ \$			+ \$		N/A	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	4,88	1.94	\$		N/A	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,317	7.90	\$		N/A	-
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		_						-
		monthly net income.	8a.	\$	(0.00	\$		N/A	
	8b.	Interest and dividends	8b.	\$		0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$		0.00	\$		N/A	-
	8d.	Unemployment compensation	8d.	\$		0.00	\$		N/A	-
	8e.	Social Security	8e.	\$		0.00	\$		N/A	-
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	e 	\$ \$		0.00 0.00	\$ 		N/A N/A	-
	8h.	Other monthly income. Specify: Auto reimbursement - sales	8h				+ \$		N/A	-
		<u> </u>	_				Ė			- ¬
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	138	3.46	\$		N/A	<u>\</u>
10.	Cald	culate monthly income. Add line 7 + line 9.	10. \$		3,456.36	+ \$		N/A =	\$	3,456.36
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			•					,
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	deper		•			chedule . 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies						12.	\$	3,456.36
10	Da :	you expect an increase or decrease within the year after you file this face.	2							y income
13.		you expect an increase or decrease within the year after you file this form No.	ſ							
		Yes. Explain: Current income of \$15,000.00 will not continue.								

Official Form 106I Schedule I: Your Income page 2

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	n this informa	tion to identify yo	our case:			ı						
Debt		Robert K Erl				Che	eck if this is:					
	NODELLI CHARGON						☐ An amended filing					
Debt (Spo	tor 2 ouse, if filing)						A supplement show 13 expenses as of	wing postpetition chapter the following date:				
Unite	ed States Bankr	uptcy Court for the	: NORTH	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY					
Case	e numbe r											
	nown)											
Of	ficial Fo	rm 106J										
Sc	chedule	J: Your	Exper	nses				12/1				
info	rmation. If m	and accurate as ore space is ne n). Answer eve	eded, atta	. If two married people ar ich another sheet to this n.	e filing together, b form. On the top of	oth are equ f any additi	ually responsible fo ional pages, write y	or supplying correct your name and case				
Part		ibe Your House	ehold									
1.	Is this a joir											
	■ No. Go to		in a separ	ate household?								
	□N											
	ΠY	es. Debtor 2 mus	st file Offici	ial Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Del	btor 2.					
2.	Do you have	e dependents?	■ No									
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?				
	Do not state							□ No				
	dependents	names.						□ Yes □ No				
								□ No □ Yes				
					-			□ No				
								☐ Yes				
								□ No				
	D							☐ Yes				
3.	expenses o	oenses include f people other t d vour depende	han _—	No Yes								
		, , , , , , , , , , , , , , , , , , , ,										
exp	imate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp								
the	value of sucl	h assistance an		government assistance in			Your exp	oneae				
(Ott	icial Form 10)6I.)					Tour exp	CIISCS				
4.		or home owners and any rent for th		ses for your residence. In or lot.	nclude first mortgag	e 4.	\$	1,367.00				
	If not includ	led in line 4:										
		estate taxes				4a.	·	0.00				
		rty, homeowner's				4b.	·	0.00				
				upkeep expenses		4c.	·	0.00				
5.		owner's associat		aominium aues our residence. such as hoi	me equity loans	4d. 5.	·	0.00				

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Debtor 1 Robert K Erlandson	Case number (if known)
6. Utilities:	
6a. Electricity, heat, natural gas	6a. \$ 130
6b. Water, sewer, garbage collection	6b. \$ 85
6c. Telephone, cell phone, Internet, satellite, and cabl	
6d. Other. Specify:	6d. \$ 0
7. Food and housekeeping supplies	7. \$
. Childcare and children's education costs	8. \$ 0
. Clothing, laundry, and dry cleaning	9. \$
O. Personal care products and services	
•	
1. Medical and dental expenses	11. \$75
Transportation. Include gas, maintenance, bus or train Do not include car payments.	are. 12. \$ 200
3. Entertainment, clubs, recreation, newspapers, maga:	·
4. Charitable contributions and religious donations	14. \$
5. Insurance.	ΙΨ. Ψ
Do not include insurance deducted from your pay or include	ided in lines 4 or 20
15a. Life insurance	15a. \$ 0
15b. Health insurance	15b. \$ 0
15c. Vehicle insurance	15c. \$ 85
15d. Other insurance. Specify:	15d. \$
5. Taxes. Do not include taxes deducted from your pay or i	
Specify:	16. \$ 0
7. Installment or lease payments:	
17a. Car payments for Vehicle 1	17a. \$ 40 9
17b. Car payments for Vehicle 2	17b. \$ 0
17c. Other. Specify:	17c. \$ 0
17d. Other. Specify:	17d. \$ 0
B. Your payments of alimony, maintenance, and support	t that you did not report as
deducted from your pay on line 5, Schedule I, Your II	
9. Other payments you make to support others who do	
Specify:	19.
O. Other real property expenses not included in lines 4	or 5 of this form or on Schedule I: Your Income.
20a. Mortgages on other property	20a. \$
20b. Real estate taxes	20b. \$
20c. Property, homeowner's, or renter's insurance	20c. \$
20d. Maintenance, repair, and upkeep expenses	20d. \$
20e. Homeowner's association or condominium dues	20e. \$
1. Other: Specify:	21. +\$ 0
2. Calculate your monthly expenses	
22a. Add lines 4 through 21.	\$ 2,821.3
22b. Copy line 22 (monthly expenses for Debtor 2), if any	
22c. Add line 22a and 22b. The result is your monthly ex	penses. \$ 2,821.3
	,
3. Calculate your monthly net income.	- Cahadula I
23a. Copy line 12 (your combined monthly income) from	
23b. Copy your monthly expenses from line 22c above.	23b\$
220 Subtract your monthly avanage from your monthly	ı ingama
 Subtract your monthly expenses from your monthly The result is your monthly net income. 	7 income. 23c. \$ 635
The result is your <i>monthly het income</i> .	<u></u>
24. Do you expect an increase or decrease in your exper	ses within the year after you file this form?
For example, do you expect to finish paying for your car loan with	in the year or do you expect your mortgage payment to increase or decrease becau
modification to the terms of your mortgage?	· · · · · · · · · · · · · · · · · · ·
■ No.	
☐ Yes. Explain here:	

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Fill in this infor	rmation to identify your	case:			
Debtor 1	Robert K Erlands				
Dobtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official For		an Individual	Debtor's So	chedules	12/15
If two married n	oonlo aro filing togotho	r, both are equally respo	nsible for supplying co	erroct information	
obtaining mone		n connection with a ban			ment, concealing property, or 0, or imprisonment for up to 20
Sig	gn Below				
Did you pa	ay or agree to pay some	eone who is NOT an atto	rney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	ımary and schedules fil		,
•			v		
	bert K Erlandson rt K Erlandson		X Signature o	of Debtor 2	
	ure of Debtor 1		Signature C	ט ספטנטו ב	

Date

Date April 13, 2016

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Fill	in this inforr	nation to identify you	r case:			
Deb	tor 1	Robert K Erland	SON Middle Name	Last Name		
Deb	tor 2	riotranic	Middle Hame	Edot Name		
(Spou	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	nkruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Case	e number					
(if kno	_				_	Check if this is an
						amended filing
~		4.0-				
	icial Fo	_			_	
Sta	itement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/1
					equally responsible for sup	
		n). Answer every que		uns form. On the top of any	y additional pages, write you	ui ilaille allu case
Part	1: Give I	Details About Your Ma	arital Status and Where You	Lived Before		
1.	wilat is you	r current marital statu	1 5 t			
	Married					
	□ Not ma	rried				
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
	Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	Debtor 1 Pi	rior Address:	Dates Debtor 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2
	1860 W C	obblestone	From-To:	☐ Same as Debtor		☐ Same as Debtor 1
	Romeovil	le, IL 60446	8/2006 to 4/10/2015			From-To:
			4/10/2013			
	s and territor No	<i>ie</i> s include Arizona, Ca		vada, New Mexico, Puerto R	ity property state or territor ico, Texas, Washington and V	
Part	2 Expla	in the Sources of You	r Income			
	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No					
	_	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$29,333.39	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Debtor 1 Robert K Erlandson Document Page 36 of 55 Case number (if known)

			_					
			De	ebtor 1		Debtor 2		
				purces of income neck all that apply.	Gross income (before deductions and exclusions)	Sources of inc		Gross income (before deductions and exclusions)
	or last caler anuary 1 to	ndar year: December 31, 2	2015 1	Wages, commissions, nuses, tips	\$93,374.00	☐ Wages, combonuses, tips	ımissions,	
				Operating a business		☐ Operating a	business	
		dar year before December 31, 2	2014\	Wages, commissions, nuses, tips	\$93,805.99	☐ Wages, combonuses, tips	ımissions,	
				Operating a business		☐ Operating a	business	
	and other winnings. List each	public benefit pa If you are filing a	nyments; pens n joint case ar nross income	sions; rental income; inter nd you have income that y	amples of other income are a rest; dividends; money collec- you received together, list it of tely. Do not include income t	ted from lawsuits; only once under De	royalties; an ebtor 1.	
			De	btor 1		Debtor 2		
				urces of income scribe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	art 3: Lis	t Certain Payme	ents You Mad	de Before You Filed for	Bankruptcy			
6.	Are eithe ☐ No.	Neither Debto	r 1 nor Debte	ebts primarily consume or 2 has primarily consu sonal, family, or househo	umer debts. Consumer debt	s are defined in 11	U.S.C. § 10	1(8) as "incurred by an
		□ No. Go □ Yes Lis pa no	o to line 7. It below each id that credito tinclude payr	creditor to whom you pai or. Do not include paymer ments to an attorney for the	d you pay any creditor a total d a total of \$6,425* or more ints for domestic support oblighis bankruptcy case. s after that for cases filed on	in one or more pay pations, such as ch	yments and the	ınd alimony. Also, do
	Yes.			oth have primarily consu ou filed for bankruptcy, di	imer debts. d you pay any creditor a tota	l of \$600 or more?	?	
		□ No. Go	to line 7.					
		■ Yes Lis	st below each clude paymen		d a total of \$600 or more and bligations, such as child sup			
	Creditor	Creditor's Name and Address		Dates of payme	ent Total amount paid	Amount you still owe	Was this payment for	
Amli at St Charles 100 Lakeside Drive Saint Charles, IL 60174		74	monthly	\$1,367.00			Card	

☐ Suppliers or vendors☐ Other Rent

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	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	PNC Bank	monthly	\$409.33	\$23,000.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any gent control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yog g securities; and a	ou are a general partner; corporations ny managing agent, including one for
	NoYes. List all payments to an insider.				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider		ments of transfer a	my property on a	ccount of a dept that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures	,		
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes Fill in the details				
	Yes. Fill in the details. Case title	Nature of the case	Court or agency		Status of the case
	Case number Beth Erlandson vs Robert Erlandson 2015 D 990	Dissolution of Marriage	Will County 14 W. Jefferson Joliet, IL 60432		■ Pending □ On appeal □ Concluded
	Wells Fargo Bank NA vs. Robert K. Erlandson, Beth A. Erlandson; Wells Fargo Bank, N.A., Unknown Owners and Non-Record Claimants; The Pointe at Fieldstone Condominium Association 15 CH 02079	Foreclosure	Will County 14 W. Jefferson Joliet, IL 60432		■ Pending □ On appeal □ Concluded

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10.	Within 1 year before you filed for bankru Check all that apply and fill in the details be		as any of your property repossessed, foreclosed	, garnished, attache	ed, seized, or levied?
	□ No. Go to line 11.				
	Yes. Fill in the information below.				
	Creditor Name and Address	De	scribe the Property	Date	Value of the property
		Ex	plain what happened		
	Ally Financial PO Box 380901 Minneapolis, MN 55438		14 Cadillac SRX (property returned to aler prior to repossession)	June 2015	Unknown
	• ,		Property was repossessed.		
			Property was foreclosed. Property was garnished.		
			Property was attached, seized or levied.		
11.	Within 90 days before you filed for bank accounts or refuse to make a payment base. No Yes. Fill in the details.		did any creditor, including a bank or financial ins you owed a debt?	stitution, set off any	amounts from your
	Creditor Name and Address	De	scribe the action the creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, o No Yes		as any of your property in the possession of an a er official?	assignee for the ben	efit of creditors, a
Par	t 5: List Certain Gifts and Contribution	ıs			
13.	Within 2 years before you filed for bankr	uptcy,	did you give any gifts with a total value of more th	nan \$600 per person	1?
	No				
	Yes. Fill in the details for each gift.				
	Gifts with a total value of more than \$60 per person	00	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.		uptcy,	did you give any gifts or contributions with a tota	I value of more than	\$600 to any charity?
	NoYes. Fill in the details for each gift or or	ontribut	ion		
	Gifts or contributions to charities that a more than \$600 Charity's Name		Describe what you contributed	Dates you contributed	Value
	Address (Number, Street, City, State and ZIP Cod	e)			
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did you lose anyt	hing because of the	ft, fire, other disaster,
	■ No				
	Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Include	the amount that insurance has paid. List pending noe claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers	S			

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	consulted about seeking bankruptcy or prep Include any attorneys, bankruptcy petition prep			ces required	d in your bankruptcy.	
	□ No					
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and variansferred	alue of any proper	rty	Date payment or transfer was made	Amount of payment
	CC Advising Inc				01/12/2016	\$14.76
	Alonzo H. Zahour 235 Remington Blvd., Suite G1 Bolingbrook, IL 60440 ahzlawyer@aol.com	Attorney Fees			01/20/2016	\$700.00
	Debtor Ed's Credit Counseling				02/09/2016	\$0.00
	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor. Do not include any payment or transfer that you so that you have the second of	rs or to make payments			or transfer any prope	erty to anyone who
	Person Who Was Paid Address	Description and variansferred	alue of any proper	rty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankrupte transferred in the ordinary course of your but include both outright transfers and transfers may include gifts and transfers that you have already include yets. Fill in the details.	usiness or financial affa ade as security (such as y listed on this statemen	airs? the granting of a sec t.	curity interes	et or mortgage on you	r property). Do not
	Person Who Received Transfer Address	Description and v property transfer			any property or received or debts change	Date transfer was made
19.	Person's relationship to you Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.		ny property to a sel	f-settled tru	ust or similar device	of which you are a
	Name of trust	Description and	value of the proper	ty transferr	ed	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and Stora	ge Units		
-	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, associon No	or other financial accou	nts; certificates of			, ,
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	clo	te account was used, sold, oved, or peformed	Last balance before closing or transfer

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	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	PNC Bank	XXXX-5871	■ Checking □ Savings □ Money Ma □ Brokerage □ Other		12/08/2015	\$0.00
	PNC Bank	XXXX-6051	☐ Checking ☐ Savings ☐ Money Ma ☐ Brokerage ☐ Other		01/11/2016	\$13.62
21.	Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details.	year before you filed fo	r bankruptcy, a	ny safe de	posit box or other depo	sitory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit o ■ No □ Yes. Fill in the details.	or place other than you	r home within 1	year befo	re you filed for bankrup	tcy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control	for Someone Else				
23.	Do you hold or control any property that so for someone. No Yes. Fill in the details.	meone else owns? Incl	ude any proper	ty you bor	rowed from, are storing	for, or hold in trust
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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24.	Has	any governmental unit notified you that	you may be liable or potentially liable	e une	der or in violation of an environm	ental law?	
		Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice	
25.	Hav	e you notified any governmental unit of	any release of hazardous material?				
		No Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice	
26.	Hav	e you been a party in any judicial or adn	ninistrative proceeding under any env	iron	mental law? Include settlements	and orders.	
		No Yes. Fill in the details.					
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case	
Par	t 11:	Give Details About Your Business or	Connections to Any Business				
27.	Witl	nin 4 years before you filed for bankrupt	cy, did you own a business or have ar	ny of	f the following connections to any	/ business?	
		☐ A sole proprietor or self-employed in	n a trade, profession, or other activity	, eith	ner full-time or part-time		
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership						
	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation						
	No. None of the above applies. Go to Part 12.						
		Yes. Check all that apply above and fill	in the details below for each business	s.			
		siness Name dress	Describe the nature of the business		Employer Identification numbe Do not include Social Security		
		mber, Street, City, State and ZIP Code)	P Code) Name of accountant or bookkeeper		Dates business existed		
28.		nin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, did you give a financial statement	to a	nyone about your business? Incl	ude all financial	
		No Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)						

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Part 12: Sign Below		
are true and correct. I understand that	t of Financial Affairs and any attachments, and I declare under penalty of perjury that the answing a false statement, concealing property, or obtaining money or property by fraud in connection up to \$250,000, or imprisonment for up to 20 years, or both.	
/s/ Robert K Erlandson		
Robert K Erlandson	Signature of Debtor 2	
Signature of Debtor 1		
Date April 13, 2016	Date	
Did you attach additional pages to <i>Yoເ</i>	tatement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?	
No		
□ Yes		

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	_
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

BEFORE THE CASE IS FILED A.

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other

attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section

726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 In excess of 6 hours of attorney time was expended with client by the office of Alonzo H.

 Zahour in pre-filing conferences, asset and debt investigation and document preparation.
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
 - (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
 - (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$3.810.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received, \$1,070.00 toward the flat fee, leaving a balance due of \$2,740.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date:	appear in court to object.
Signed: Bobat KEla 1	
Robert K Erlandson	Alonzo H. Zahour 03099598
	Attorney for the Debtor(s)
Debtor(s)	

Do not sign this agreement if the amounts are blank.

Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Robert K Erlandson		Case No.	
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR DI	EBTOR(S)
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	y, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	3,810.00
	Prior to the filing of this statement I have received		\$	1,070.00
	Balance Due		\$	2,740.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. ′	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	n unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name			
5.	In return for the above-disclosed fee, I have agreed to re-	nder legal service for all aspec	cts of the bankruptcy of	ease, including:
1	a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credito d. [Other provisions as needed] Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou	ement of affairs and plan which ors and confirmation hearing, a educe to market value; ex ns as needed; preparation	ch may be required; and any adjourned hea cemption planning;	rings thereof;
6. I	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any adv	e does not include the followin	ng service:	
		CERTIFICATION		
	I certify that the foregoing is a complete statement of any ankruptcy proceeding.	y agreement or arrangement for	or payment to me for r	epresentation of the debtor(s) in
Α	pril 13, 2016	/s/ Alonzo H. Zal	hour	
	Pate	Alonzo H. Zahou Signature of Attorn Alonzo H. Zahou 235 Remington Bolingbrook, IL	ur 03099598 ney ur Blvd Suite G1	7

ahzlawyer@aol.com

Name of law firm

United States Bankruptcy Court Northern District of Illinois

In re	Robert K Erlandson		Case No.	
		Debtor(s)	Chapter 13	
	VE	RIFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	21
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	ors is true and correct to the	e best of my
Date:	April 13, 2016	/s/ Robert K Erlandson Robert K Erlandson Signature of Debtor		

Ally Financial PO Box 380902 Minneapolis, MN 55438

American Express Customer Service PO Box 981535 El Paso, TX 79998-1535

Amex Department Stores PO Box 8218 Mason, OH 45040

Bank of America PO Box 982235 El Paso, TX 79998-2235

Beth Erlandson 1980 Cobblestone Road Romeoville, IL 60446

Citi Cards PO Box 6500 Sioux Falls, SD 57117

Comenity Bank Maurices Bankruptcy Dept PO Box 182125 Columbus, OH 43218-2125

Discover Bank PO Box 30421 Salt Lake City, UT 84130-0421

DuPage Medical Group 15921 Collections Center Drive Chicago, IL 60693-0159

DuPage Valley Anesthesia PO Box 3872 Carol Stream, IL 60132

Edward Hospital 801 S Washington Naperville, IL 60540 Edward Hospital PO Box 4207 Carol Stream, IL 60197-4207

Kohl's PO Box 3043 Milwaukee, WI 53201-3043

Law Office of Kathryn Engel 15 Salt Creek Lane Suite 122 Hinsdale, IL 60521

Macys Bankruptcy Processing PO Box 8053 Mason, OH 45040

Medical Recovery Specialists 2250 E Devon Ave Suite 352 Des Plaines, IL 60018

PNC Bank 2730 Liberty Ave Pittsburgh, PA 15222

PNC Bank 6750 Miller Road Brecksville, OH 44141

PNC Bank PO Box 3180 Pittsburgh, PA 15230

State Farm Bank PO Box 87 Deposit, NY 13754-0087

Wells Fargo Home Mortgage c/o Manley Deas Kochalski LLC One E Wacker Suite 1250 Chicago, IL 60601